

Maternal and Child Health Advisory Board (MCHAB)
April 2, 2004
Minutes

BOARD MEMBERS PRESENT

Roger Volker, MDiv, Chairperson
Terrence McGaw, MD, Vice-Chairperson
Jeffery Wrightson, MD
Susanne Magleby
Maureen Fanning for Donald Kwalick, MD, MPH
Assemblywoman Genie Ohrenschall
Michelle Kling, RN, MS,

BOARD MEMBERS ABSENT

Beverly Neyland, MD
T.J. (Terri) Rosenberg
Senator Maggie Carlton
Raquel Knecht, MS

NEVADA STATE HEALTH DIVISION STAFF PRESENT

Judith Wright, Chief, Bureau of Family Health Services (BFHS)
Chris Forsch, Oral Health Consultant, BFHS
Kyle Devine, Child and Adolescent Health Coordinator, BFHS
Tami Terstege, Administrative Assistant, BFHS
Dana Zive, MPH, Real Choice Systems Change Grant (RCSC) Program Manager, BFHS
Sean Crowley, RCSC Management Analyst, BFHS
Doug Schrauth, Women, Infants and Children (WIC) Program Manager, BFHS
Greg Tanner WIC, BFHS
Barry Lovgren, Perinatal Substance Abuse Prevention (PSAP) Coordinator, BFHS
Cynthia Huth, RNC, MSN, BFHS

OTHERS PRESENT

Phil Nowak, Chief, Medicaid Managed Care and Nevada ✓ Check Up, Division of Health
Care Financing and Policy (DHCFP)
Janice Smith, RN, Sunrise Hospital, Maternal and Child Health (MCH)
Linda Yi, RNC, University Medical Center (UMC)
Leone Lettsomel, Deputy Administrator of Medical Services, Economic Opportunity
Board (EOB)
Janice Pine, Government Relations Director, Saint Mary's

CALL TO ORDER

Roger Volker called to order the Maternal and Child Health Advisory Board (MCHAB) meeting at **10:15 a.m.** at Washoe County District Health Department (WCDHD), Reno and Nevada Early Intervention Services (NEIS), Las Vegas. This was a videoconferenced public meeting and the public was invited to make comments. In accordance with the Nevada Open Meeting Law, this meeting was posted at the following locations: Bureau

of Family Health Services (BFHS), Carson City; Kinkead Building, Carson City; Nevada State Library and Archives, Carson City; WCDHD, Reno; Clark County Health District (CCHD), Las Vegas; Elko Nursing Office, Elko; NEIS, Las Vegas; and on the Nevada State Health Division (NSHD) website at www.health2k.state.nv.us .

Introductions were made around the tables in both Reno and Las Vegas.

APPROVAL OF MINUTES FROM THE MEETING ON JANUARY 16, 2004

Maureen Fanning motioned to approve the minutes of January 16, 2004 as written and, Dr. Terrence McGaw seconded. **MOTION APPROVED.**

The MCHAB presented Yvonne Sylva with an award. Mr. Volker stated this meeting would be Ms. Sylva's last MCHAB meeting due to the fact she is retiring and thanked her on the Board's behalf for all the good she has done for woman and children in Nevada. Ms. Sylva thanked the Board and the staff.

UPDATE IN MEDICAID MANAGED CARE AND NEVADA √ CHECK UP INCLUDING AN UPDATE ON DENTAL.

Phil Nowak reported on Nevada √ Check Up, Medicaid, and Dental care. As for the number of children enrolled in Nevada √ Check Up has 26,174 with 21,000 children enrolled in managed care. In Washoe County, the combined enrollment for Medicaid and Nevada √ Check Up is 16,300. Mr. Nowak gave the Board an update on the non-emergency transportation system. Mr. Nowak stated the program was started statewide in the fall of 2003. Medicaid and Nevada √ Check Up are now at a point where they can start receiving and collecting data. Since January 2004, there have been 20,000 trips for Medicaid and Nevada √ Check Up recipients per month. Mr. Nowak stated he does not know how many of the 20,000 were recipient's taking multiple trips.

Medicaid and Nevada √ Check Up are meeting with the School of Dentistry in Clark County as well as the two managed care plans to see if they are in the process of centralizing their appointment functions in a call center. The hopes for the call center are to have a script, which informs all recipients of the non-emergency transportation system, and to establish a formal reminder system. Mr. Nowak continued by saying part of the Managed Care conversion in Northern Nevada is to make sure Medicaid and Nevada √ Check Up are seamless and coordinated with their sister agencies, particularly agencies where there are children and infants in custody in either Child Protective Services (CPS), foster care, or court administrative control. The reason for this is to make sure these agencies are not having problems when children and infants are either re-enrolled or removed from custody and have to change providers. Mr. Nowak stated he is working with the Welfare Division; the purpose is to provide the estimated date of birth to the managed care provider so when the infant is born there is not a question of eligibility or of providing services. Mr. Nowak reported this update should be in place before the next Board meeting.

Mr. Nowak stated there are four ways to navigate the new Medicaid system. The first is the 800 number where providers need to have the patient's Medicaid identification

number, social security number or the patient's last name. The second is the automated voice look up where providers need to have the patient's Medicaid identification number. The third is the website, where providers do not have to have special software but will need to set up an account with a provider identification and password. The last option is the card swipes. Mr. Nowak stated there are service fees, set up fees, and the cost of the equipment with this option, and as to cost he is unsure.

Michelle Kling addressed the Board with some comments concerning the new card swipe machines from Medifax. Ms. Kling stated the WCDHD has purchased two of the Medifax card swipe machines and each machine costs \$700. There is a \$25 a month service charge, as well as a \$5 a month charge per machine being used and a \$.35 charge every time a card is swiped. Ms. Kling asked Mr. Nowak if there was anything he could do with Medifax about the \$.35 charge per transaction. Mr. Nowak replied he would definitely talk to Medifax. Ms. Kling then addressed the Board about the managed care in Washoe County. Ms. Kling stated the WCDHD had trouble using the first three ways to navigate the new Medicaid system and Hillary Jones from Division of Health Care Financing and Policy (DHCFP) had been absolutely wonderful in helping with the new Medifax card swipe machines. Ms. Kling added, a hand count had been done in the month of March and 72 Nevada Care patients came in requesting immunizations. Of those 72 patients, 56 were referred to providers and 16 chose to stay with WCDHD. Ms. Kling continued saying the decision to refer those patients was very difficult but had to be done because Nevada Care would not reimburse the health department. She also noted she is working with Nevada Care and they have been very reasonable about assisting the WCDHD in becoming a provider.

Ms. Sylva commented on the possibility of Woman, Infants and Children (WIC)/Electronic Benefits Transfer (EBT) partnering with Nevada's Check Up and Medicaid to use the smart cards to combine information from all programs. Mr. Volker commented in Las Vegas there is currently a project to create a special care access network and Medicaid is very actively participating. In Washoe County, there is Washoe County Access to Health Care Network which has been functioning for the past two years and has a case management function for uninsured and Medicaid patients.

UPDATE TO THE BOARD ON SEX EDUCATION CURRICULUMS IN NEVADA'S SCHOOL DISTRICTS. BOARD DISCUSSION AND RECOMMENDATIONS TO THE BUREAU OF FAMILY HEALTH SERVICES (BFHS) STAFF.

Kyle Devine stated since the last time he presented to the Board concerning sex education, he has conducted an informal survey of all the health teachers in Nevada, about 70 in all. Mr. Devine received responses from 20 teachers. Mr. Devine asked the Governor's Youth Advisory Council (GYAC) members what they remembered from their class work and what they learned while in high school.

The first question asked in the survey related to what information was given in sex education in elementary school, middle school, and high school. In elementary they were primarily taught plant and animal science, hygiene, basic anatomy, reproduction, and

about the menstrual cycle. In middle school, they were taught hygiene, the physiological changes during adolescence, hormonal changes, reproductive anatomy, fertilization, pregnancy, sexually transmitted diseases (STDs) and birth control. In high school, reproduction, STDs, abstinence and contraception were taught. Another question asked was whether or not there was open conversation or if the teachers just talked about anatomy and physiological facts. In the rural areas there was no problem with open conversation; however Clark County indicated they try to avoid any open conversation. Mr. Devine noted one question asked how controversial questions were handled. All of the rural counties said they felt comfortable answering controversial questions and if need be would refer the students to their parents. In Clark County the teachers would refer the students to the school nurse or their parents. Another survey question asked what types of questions are answered. The rural areas stated they answered all questions when asked and Clark County stated they are able to answer all questions as long it related to the curriculum. Human Immunodeficiency Virus (HIV)/Acquired Immune Deficiency Syndrome (AIDS) was taught two or three days, STDs was 2 or 3 classes, pregnancy prevention was anywhere from 2 to 5 days, Clark County had a limited discussion of contraception and the rural areas was 1 to 2 days of a semester. Abstinence was taught through out all the curriculums and lasted from 1 day to about 4 weeks. The teachers and students were asked on how to improve the curriculum. It was suggested parents get involved. The teachers also indicated they need more time and more money. The students indicated they need more discussion time and more time spent on refusal skills and prevention. Ms. Sylva recommended the Board invite Dr. Carlos Garcia to attend a MCHAB meeting and make a presentation based on school health and the services available in Clark County. Dr. Jeffrey Wrightson suggested the next meeting be held in Las Vegas. Mr. Volker also recommended Brad Keating, the current Chairperson for the GYAC be invited to the next MCHAB meeting and present to the Board what his findings have been about sex education in Clark County.

**UPDATE ON NEWBORN INTENSIVE CARE UNIT REGULATIONS
SUBCOMMITTEE AND THE PROCESS TO CHANGE THE REGULATIONS.**

Judith Wright stated the subcommittee had two meetings on the regulations and both went very smoothly. The subcommittee will be presenting the proposed regulations to the Board of Health in June. Ms. Wright continued by saying the subcommittee has exceeded her expectations in how much progress was made in just a few meetings.

**REPORT ON REAL CHOICE SYSTEM CHANGE (RCSC) PROJECT TO
DEVELOP SYSTEMS OF CARE FOR CHILDREN WITH SPECIAL HEALTH
CARE NEEDS (CSHCN) STATEWIDE. BOARD DISCUSSION AND
RECOMMENDATION TO BFHS STAFF.**

Dana Zive gave the Board an overview of the RCSC history, the reason it was established, and how the State of Nevada obtained the grant money. The funding came from Centers for Medicaid and Medicare Services (CMS) in fiscal year 2002 in the amount of \$1.4 million for three years of grant activity and placed the grant in the SHD BHFS. Ms. Zive informed the Board of the RCSC's goals. They are: establish enduring systems improvements, increase access to and coordination of community-based, family-focused program services, and supports for all of Nevada's CSHCN. Ms. Zive continued

by explaining what a special health care need is: a chronic physical, developmental, behavioral, or emotional condition, which requires health and related services beyond what is required by children generally. Ms. Zive noted that for the RCSC to meet the primary goal grant activities include six major project components. They are, assessing the needs of Nevada's CSHCN and their families, evaluating service delivery and planning approaches in other states, developing public policy initiatives, implementing a statewide media campaign, establishing a permanent advisory council, and developing and implementing three pilot projects. Ms. Zive updated the Board on the progress made and of where the project is currently. Ms. Sylva complimented Ms. Zive on a very good presentation. She also informed Ms. Zive of the Nevada Administrative Code (NAC) 442 and take a look at the section for CSHCN. Ms. Sylva stated she is pleased to see the RCSC program has taken into account the statewide disabilities plan. Mr. Volker suggested having at least one safety net provider on the advisory council.

PRESENTATION ON THE DEVELOPMENT OF ELECTRONIC BENEFIT TRANSFER (EBT) FOR NEVADA'S SUPPLEMENTAL FOOD PROGRAM FOR WOMEN, INFANTS AND CHILDREN (WIC) AND PLANS TO ROLL IT OUT STATE WIDE. BOARD DISCUSSION AND RECOMMENDATIONS TO THE BFHS STAFF.

Greg Tanner presented an overview of the WIC/EBT program history and background. Mr. Tanner stated the WIC/EBT card is set up to partner and share information with other programs such as Medicaid. He added Nevada is one of three states to participate in the Western Governor Association (WGA) Health Passport Project Field Demonstration. The field demonstration was launched in 2000 and has been operating in Washoe County for three years. There are 7000 participants and 32 vendors with the WIC program, and the program is looking to add 8 more vendors. Mr. Tanner pointed out the EBT program is very important to the vendors, because it has a number of benefits. The first is participants can only purchase WIC approved food. The EBT system insures all foods are WIC approved; it reduces cashier error, allows for faster WIC checkouts, reduces paperwork, and encourages more participant purchases. With the EBT cards, WIC participants do not have to purchase everything approved in one trip like with the checks. The WIC program has four alternatives now the pilot project is complete. They are: maintain the status quo; a return to paper checks, which are not favored with the vendors in Washoe; and implement an EBT program statewide using the magnetic strip card similar to those used for the food stamp program. The fourth and most cost efficient way to use the grant money would be to have a statewide roll out of the smart cards which is what WIC is currently planning to do. Dr. Wrightson asked how WIC is able to pay for the vendors to get the training and the equipment needed for the roll out. Mr. Tanner responded by saying WIC has a federal grant that is specifically for EBT, and those funds will be used to facilitate the implementation.

UPDATE ON MATERNAL AND CHILD HEALTH CAMPAIGN AND ITS FUTURE. BOARD DISCUSSION AND RECOMENDATIONS TO BFHS STAFF.

Cynthia Huth reported the Maternal and Child Health (MCH) program has dropped Baby Your Baby and decided to take a new innovative approach to get women into early prenatal care and decrease the low birth weight rate. Ms. Huth stated statewide early

prenatal is stable at 75% and has been there for the last few years, the infant mortality rate was not available, the low birth weight rate in 2002 was 6.2%, and in 2003 it was 8.2%. In Clark County, the low birth weight rate has gone from 6.3% to 7.9%. In Washoe County it has gone from 6.1% to 9.2%. She stated these changes are due to many different things such as, the increase in multiple births and nutrition. Ms. Huth stated the MCH program would be issuing an RFP asking for providers to propose how they would go about providing services to and for high risk, low-income women who do not qualify for Medicaid or Nevada ✓ Check Up, looking for innovative ideas and proposals.

The MCH program is continuing to provide an 800 number with a bilingual operator. Ms. Huth reported a media campaign to help Nevada become aware of the MCH line is progressing. Ms. Huth is currently working on a contract with the Nevada Broadcasters Association (NBA) to do some public service announcements (PSAs) in both Spanish and English for radio and television statewide.

Dr. McGaw asked how people would enter the program. Ms Huth replied, this is one of the questions to be addressed in the proposal for the RFP. Dr. McGaw also asked if it was in the RFP for the vendors to explain how they will help reduce the low birth weight rate.

REPORT ON THE PERINATAL SUBSTANCE ABUSE PREVENTION SUBCOMMITTEE (PSAP).

Barry Lovgren informed the Board he met with The Nevada Children's Trust Fund to present the grant application for \$73,000 for Fetal Alcohol Spectrum Disorder (FASD) Public Education Campaign; the committee funded the public education campaign for \$36,000. Mr. Lovgren stated the PSAP website had been revised; the list of resources needed to be revised, as well as, the library of perinatal substance abuse resources available on the Internet. There are two new members on the PSAP Subcommittee, Dr. Susan Doctor and Charlene Hurst. Mr. Lovgren reported Dr. Ira Chasnoff will be coming to Nevada to do two workshops, one in the north and one in the south on perinatal substance abuse and prevention, and that Dr. Chasnoff is seeking grant funds to conduct a study in Nevada of intervention for perinatal substance abuse. The Centers for Disease Control and Prevention (CDC) has established a Center for Excellence for dealing with FASD. There will be a two day conference again in Florida which, Mr. Lovgren and Dr. Doctor will be attending. Mr. Lovgren stated he put in a request for technical support from the Center for Excellence but was asked to wait until after the conference.

BOARD DISCUSSION ON STAFF REPORT AND POSSIBLE RECOMMENDATIONS TO BFHS STAFF.

Mr. Volker asked Ms. Wright if there was anything in the staff report she would like to point out. Ms. Wright stated the CDC will be giving the Oral Health Program \$450,000.00 instead of \$329,000.00. Ms. Wright gave an update on the GYAC stating there were 35 applications statewide and the first meeting will be held in May. Ms. Wright reported the Newborn Hearing Screening (NBHS) program is up and running. The Primary Care and Development Center (PCDC) completed 17 J-1 Visa applications and 8 are going to be approved, and Nevada Early Intervention Services (NIES) has decreased the waiting lists. Ms. Kling asked what exactly the Newborn Hearing

Screening program was finding in the screenings. Ms. Wright replied she would get a copy of the report sent to the Governor. Mr. Volker told Ms. Wright the report is a great way to keep the MCHAB informed and the reports are appreciated.

PUBLIC COMMENT AND DISCUSSION.

No public comments were made.

ADJOURNMENT

The meeting was adjourned at **12:30 p.m.**